

MEMORANDUM

Agenda Item No. 11(A)(9)

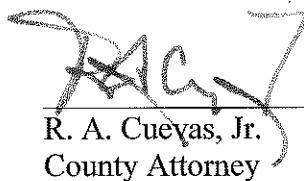
TO: Honorable Chairwoman Rebeca Sosa
and Members, Board of County Commissioners

DATE: March 5, 2013

FROM: R. A. Cuevas, Jr.
County Attorney

SUBJECT: Resolution retroactively
authorizing in-kind services for
the October 31, 2012 "11th
Annual Hallelujah Night
Festival" event

The accompanying resolution was prepared and placed on the agenda at the request of Prime Sponsor Commissioner Dennis C. Moss.



R. A. Cuevas, Jr.
County Attorney

RAC/smm




MEMORANDUM

(Revised)

TO: Honorable Chairwoman Rebeca Sosa
and Members, Board of County Commissioners

DATE: March 5, 2013

FROM: 
R. A. Cuevas, Jr.
County Attorney

SUBJECT: Agenda Item No. 11(A)(9).

Please note any items checked.

- ☐ "3-Day Rule" for committees applicable if raised
- ☐ 6 weeks required between first reading and public hearing
- ☐ 4 weeks notification to municipal officials required prior to public hearing
- ☐ Decreases revenues or increases expenditures without balancing budget
- ☐ Budget required
- ☐ Statement of fiscal impact required
- ☐ Ordinance creating a new board requires detailed County Mayor's report for public hearing
- ☐ No committee review
- ☐ Applicable legislation requires more than a majority vote (i.e., 2/3's ____, 3/5's ____, unanimous ____) to approve
- ☒ Current information regarding funding source, index code and available balance, and available capacity (if debt is contemplated) required

Approved _____ Mayor
Veto _____
Override _____

Agenda Item No. 11(A)(9)

3-5-13

RESOLUTION NO. _____

RESOLUTION RETROACTIVELY AUTHORIZING IN-KIND SERVICES FROM THE PARKS, RECREATION, AND OPEN SPACES DEPARTMENT FOR THE OCTOBER 31, 2012 "11TH ANNUAL HALLELUJAH NIGHT FESTIVAL" SPONSORED BY SOUTH EAST DADE MINISTERIAL ALLIANCE, INC., A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED \$650.00 TO BE FUNDED FROM THE BALANCE OF THE DISTRICT 9 FY 2012-13 IN-KIND RESERVE FUND

WHEREAS, South East Dade Ministerial Alliance, Inc. has requested in-kind services from the Parks, Recreation and Open Spaces Department for the October 31, 2012 "11th Annual Hallelujah Night Festival" event in an amount not to exceed \$650.00 (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the "11th Annual Hallelujah Night Festival" affords children the opportunity to enjoy Halloween in a safe and positive atmosphere; and

WHEREAS, South East Dade Ministerial Alliance, Inc. is a not-for-profit organization; and

WHEREAS, the "11th Annual Hallelujah Night Festival" is a special event, as that term is defined in the attached Fee Waiver/In-kind Service Application, and \$650.00 of the in-kind services shall be funded from the balance of the District 9 FY 2012-13 In-Kind Reserve Fund,

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF MIAMI-DADE COUNTY, FLORIDA, that this Board retroactively authorizes in-kind services from the Parks, Recreation and Open Spaces Department for the October 31, 2012 "11th Annual Hallelujah Night Festival" event sponsored by South East Dade Ministerial Alliance, Inc. in an amount not to exceed \$650.00 to be funded from the balance of District 9 FY 2012-13 In-Kind Reserve Fund.

The Prime Sponsor of the foregoing resolution is Commissioner Dennis C. Moss. It was offered by Commissioner _____, who moved its adoption. The motion was seconded by Commissioner _____ and upon being put to a vote, the vote was as follows:

Rebeca Sosa, Chairwoman
Lynda Bell, Vice Chair

Bruno A. Barreiro
Jose "Pepe" Diaz
Sally A. Heyman
Jean Monestime
Sen. Javier D. Souto
Juan C. Zapata

Esteban L. Bovo, Jr.
Audrey M. Edmonson
Barbara J. Jordan
Dennis C. Moss
Xavier L. Suarez

The Chairperson thereupon declared the resolution duly passed and adopted this 5th day of March, 2013. This resolution shall become effective ten (10) days after the date of its adoption unless vetoed by the Mayor, and if vetoed, shall become effective only upon an override by this Board.

MIAMI-DADE COUNTY, FLORIDA
BY ITS BOARD OF
COUNTY COMMISSIONERS

HARVEY RUVIN, CLERK

By: _____
Deputy Clerk

Approved by County Attorney as
to form and legal sufficiency.

GKS

Gerald K. Sanchez

MIAMI-DADE COUNTY
FEE WAIVER/IN-KIND SERVICES APPLICATION
FY 2008-09

COUNTY FEE WAIVERS OR IN-KIND SERVICES REQUESTED THROUGH THIS PROCESS ARE NOT EFFECTIVE UNTIL APPROVED BY ACTION OF THE BOARD OF COUNTY COMMISSIONERS PURSUANT TO THE MIAMI-DADE COUNTY HOME RULE CHARTER

Please complete the following form and submit completed form along with requested materials, if applicable, to:

Office of Strategic Business Management
111 N.W. 1st Street, Suite 2200
Miami, FL 33128

Phone: (305) 375-5143
Fax: (305) 375-5168

Type of Event/Application (select one of the following):

- ☐ District Event - Event of minimal impact related to specific commission district (Complete questions 1-7, sign and date; copy will be submitted to the appropriate District Commissioner within two days of receipt of application.)
- ☐ Small Event - Event of minimal impact not necessarily related to a specific commission district. (Complete questions 1-7, sign and date.)
- ☒ Special Event* - Event with expected attendance of less than 5,000 with localized impact limited to an individual community or municipality (Complete questions 1-12, sign, date and submit form no later than 60 days prior to event date.)
- ☐ Major Event* - Large Event with expected attendance of over 5,000 or significant probability of protests, controversy, violence or vandalism (Complete questions 1-12, sign, date and submit form no later than 120 days prior to event date.)

****Note: Event budget must be included for "Special" and "Major" event types.****

Commissioner sponsoring event

Commissioner Dennis C. Moss

1. Full legal name of the requesting organization: South East Dade Ministerial Alliance, Inc.

2. Applicant Status: (Select one of the choices below)

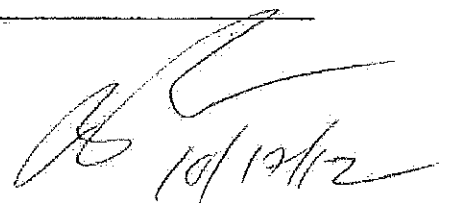
- ☒ Not-For-Profit or Tax Exempt
☐ For-Profit
☐ Local Government or Public Entity
☐ Other (specify): _____

3. Name and contact information for single point of contact (address, phone, fax, e-mail address, etc.):

Rev. Norman E. Freeman, Jr. / 305. 772. 1974

4. Specify fee waiver or in-kind service requested (quantify, if applicable):

A stage


10/12/12

5. Name, date of event, description, and purpose of the event (if event is a fund-raiser, define the beneficiaries): _____

11th Annual Hallelujah Night Festival

October 31, 2012

The purpose of this event is to continually provide alternatives to keeping our children off the streets during the Halloween Season. Free to the community, the following items are provided, entertainment, games, popcorn, candy, drinks, etc.

6. Please select ALL that apply to event:

- ☒ Economic Development: Event supports vitality or growth of the local economy
☐ Youth/Education: Event benefits youth of any age and/or offers educational benefits
☒ Health and Social Services: Event supports health-related causes and/or social programs or institutions that improve quality of life within the community
☒ Arts and Culture: Event supports music, theatre, literature, art or culture
☐ Environmental: Event benefits environmental concerns or promotes conservation
☐ Sports and Athletics: Event supports/promotes organized sports or recreational participation

7. Physical address of event venues (please specify Commission District(s)): Roby George Park
211 S.W. 11th Ave, Homestead, FL 33030.
Commission District 9

8. Description of regional or local impact: Hallelujah Night Festival will afford children of the Homestead and Florida City communities the opportunity to participate in the Halloween season activities in a safer and positive environment that promote proper demeanor and minimizes the opportunity for mischief and possible hazardous situations.

9. Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable): _____

Event is scheduled from 6:00pm to 8:30pm

Set Up will begin at 3pm and breakdown at 8:30pm

10. Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable): Public park with baseball field, bleacher, playground area, gated pool, pavillion with courts.

11. Expected number of participants and estimated attendance (per day, if applicable): 800 - 1000

12. Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach additional pages as needed): _____

I hereby certify that all the statements made in this application are true and correct.


Signature of Authorized Representative

10/12/2012
Date



**SHOWMOBILES, STAGES, BLEACHERS,
AND SOUND PRODUCTION**
(305) 226-8315 Ext. 221/(305) 553-8511 (Fax)

EQUIPMENT (S) CONFIRMATION FORM

ORGANIZATION/AGENCY: Southeast Dade Ministerial Alliance, Inc.

EQUIPMENT REQUESTED: Stage 16' X 16'

NAME OF PERSON RESPONSIBLE FOR THIS BILL: Commissioner Dennis C. Moss,
Commission District #9

OR INDEX CODE (MIAMI-DADE AGENCIES ONLY): _____

BILLING ADDRESS/ZIP CODE: 1634 NW 6th Avenue Florida City FL 33034

NAME/TITLE OF THE EVENT: 11th Annual Hallelujah Night Festival

ADDRESS OF EVENT: Roby George Park 201 SW 11th Ave Hmstd

TODAY'S DATE: 10/17/12

DATE (S) & TIME OF EVENT: 10/31/12 6PM - 8:30PM

SET-UP TIME & DAY: 2PM 10/31/12

TAKE-DOWN & DAY: 9:30PM 10/31/12

CONTACT PERSON/PHONE: Rev. Norman Freeman Jr 305-772-1974

AT SITE CONTACT/CELL PHONE#: _____

SPECIAL INSTRUCTIONS: Direction item(s) are to be placed, maps, diagrams, etc.

OTHER INFORMATION: Include additional equipment if needed.

We, the users, understand that we assume full responsibility for any damage, theft, or loss to said equipment and its accessories between the time the Miami-Dade Park and Recreation Department completes setting up and the time it takes down. We, the users, also agree to adhere to the requests set forth in the rental policy. We do have a copy of the rental policy and fully understand the requirements set forth in renting the equipment requested as out-lined in the rental policy. We also understand that the total fee is to be remitted (15) fifteen working days before the event.

*Fee: \$650.00 In-kind District #9

*(SEE FEE SCHEDULE FOR EXACT CHARGES)

Signature: _____



Commissioner Dennis C. Moss

Agency/Group: Commission District #9

**CANCELLATIONS MUST BE MADE 72 HOURS IN ADVANCE OF THE
EVENT BY FAX OR EMAIL OTHERWISE EXPECT TO BE CHARGED**

½ (HALF) OF RENTAL FEE. *There will be no completed reservation on the schedule unless the confirmation Form is filled out completely and signed.

Late equipment arrivals, please call (786) 236-7926

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS							
Home	Contact Us	E-Filing Services	Document Searches	Forms	Help		
Previous on List			Next on List	Return To List			
Events			No Name History				
Entity Name Search							
<input type="button" value="Submit"/>							
<h2>Detail by Entity Name</h2>							
<h3>Florida Non Profit Corporation</h3>							
SOUTH EAST DADE MINISTERIAL ALLIANCE, INC.							
<p>This detail screen does not contain information about the 2013 Annual Report.</p> <p>Click here to determine if a 2013 Annual Report has been filed.</p>							
<h3>Filing Information</h3>							
Document Number	N93000002316						
FEI/EIN Number	650406560						
Date Filed	05/19/1993						
State	FL						
Status	ACTIVE						
Last Event	REINSTATEMENT						
Event Date Filed	12/12/2012						
Event Effective Date	NONE						
<h3>Principal Address</h3>							
1055 N.W. 6TH AVENUE FLORIDA CITY FL 33034							
Changed 01/07/2009							
<h3>Mailing Address</h3>							
P O BOX 924130 PRINCETON FL 33092							
Changed 12/12/2012							
<h3>Registered Agent Name & Address</h3>							
THOMAS, CURTIS T REV 1055 N.W. 6TH AVENUE FLORIDA CITY FL 33034 US							
Name Changed: 01/07/2009							
Address Changed: 01/07/2009							
<h3>Officer/Director Detail</h3>							

9

Name & Address

Title PD

THOMAS, CURTIS REV.
1055 NW 6 AVENUE
FLORIDA CITY FL 33034

Title VD

FREEMAN, NORMAN REV
344 SW 4 AVENUE
HOMESTEAD FL 33030

Title TD

SCOTT, WILLIE BISHOP
14320 SW 104 COURT
MIAMI FL 33176

Title D

WILLIAMS, CHARLIE BISHOP
10720 SW 218 STREET
GOULDS FL 33170

Title SD

ALLEN, MACK BISHOP
PO BOX 344157
FLORIDA CITY FL

Annual Reports**Report Year Filed Date**

2010	12/12/2012
2011	12/12/2012
2012	12/12/2012

Document Images

12/12/2012 -- REINSTATEMENT	View image in PDF format
01/07/2009 -- ANNUAL REPORT	View image in PDF format
01/31/2008 -- ANNUAL REPORT	View image in PDF format
02/02/2007 -- ANNUAL REPORT	View image in PDF format
02/03/2006 -- ANNUAL REPORT	View image in PDF format
02/09/2005 -- ANNUAL REPORT	View image in PDF format
01/30/2004 -- ANNUAL REPORT	View image in PDF format
06/19/2003 -- Amendment	View image in PDF format
01/27/2003 -- ANNUAL REPORT	View image in PDF format
02/05/2002 -- ANNUAL REPORT	View image in PDF format
02/28/2001 -- ANNUAL REPORT	View image in PDF format
08/11/2000 -- ANNUAL REPORT	View image in PDF format

03/04/1999 -- ANNUAL REPORT	View image in PDF format
03/24/1998 -- ANNUAL REPORT	View image in PDF format
12/24/1997 -- REINSTATEMENT	View image in PDF format

Note: This is not official record. See documents if question or conflict.

[Previous on List](#) [Next on List](#) [Return To List](#)

[Entity Name Search](#)

[Events](#)

No Name History

[Submit](#)

[| Home](#) | [Contact us](#) | [Document Searches](#) | [E-Filing Services](#) | [Forms](#) | [Help](#) |

Copyright © and Privacy Policies
State of Florida, Department of State

//

Memorandum



Date: March 5, 2013

To: Honorable Chairwoman Rebeca Sosa
and Members, Board of County Commissioners

From: Carlos A. Gimenez
Mayor

A handwritten signature in black ink, appearing to read "Carlos A. Gimenez", written over a horizontal line.

Subject: District Specific In-Kind Request

A retroactive waiver for in-kind services has been requested by South East Dade Ministerial Alliance, Inc., for their "11th Annual Hallelujah Night Festival" event held on October 31, 2012.

In-kind services have been requested in an amount not to exceed \$650 from the Parks, Recreation and Open Spaces Department for the use of a 16' x 16' stage. This event will be funded from the balance of District 9 FY 2012-13 In-Kind Reserve Fund.

A handwritten signature in black ink, appearing to read "Edward Marquez", written over a horizontal line.

Edward Marquez
Deputy Mayor

InkInd01309